

Customer N . 20350
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, 8th Floor
San Francisco, California 94111-3834
(415) 576-0200

ASSISTANT COMMISSIONER FOR PATENTS
BOX PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 CFR 1.53(b) is the

- ☐ patent application of
☐ continuation patent application of
☒ divisional patent application of
☐ continuation-in-part patent application of

Inventors: JIN-KUO HO; CHARNG-SHYANG JONG; CHAO-NIEN HUANG; CHIN-YUAN CHEN; CHIENCHIA CHIU;
CHENN-SHIUNG CHENG; KWANG KUO SHIH

For: OHMIC CONTACT TO SEMICONDUCTOR DEVICES AND METHOD OF MANUFACTURING THE SAME

- ☒ This application claims priority from each of the following Application Nos./filing dates:
 USSN 09/325,240, filed June 3, 1999.
the disclosure(s) of which is (are) incorporated by reference.
- ☒ Please amend this application by adding the following before the first sentence: "This application is a ☒ division ☐ continuation-in-part of and claims the benefit of U.S. Application No. 09/325,240, filed June 3, 1999, the disclosure of which is incorporated by reference."

Enclosed are:

- ☒ 10 page(s) of specification
☒ 4 page(s) of claims
☒ 1 page of Abstract
☒ 3 sheet(s) of ☒ formal ☐ informal drawing(s).
☒ An assignment (from parent application) of the invention to Industrial Technology Research Institute
☒ A ☒ signed ☐ unsigned Declaration & Power of Attorney (from parent application)
☐ A ☐ signed ☐ unsigned Declaration.
☐ A verified statement to establish small entity status under 37 CFR 1.9 and 37 CFR 1.27 ☐ is enclosed ☐ was filed in the prior application and small entity status is still proper and desired.
☐ A certified copy of a _____ application.
☐ Information Disclosure Statement under 37 CFR 1.97.
☐ A petition to extend time to respond in the parent application.
☐ Notification of change of ☐ power of attorney ☐ correspondence address filed in prior application.
☒ Please cancel claims 1-7

	(Col. 1)	(Col. 2)	
FOR:	NO. FILED	NO. EXTRA	
BASIC FEE			
TOTAL CLAIMS	20 - 20	= *0	
INDEP. CLAIMS	2 - 3	= *0	
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			

* If the difference in Col. 1 is less than 0, enter "0" in Col. 2.

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	\$380.00	OR		\$760.00
x \$9.00 =		OR	x \$18.00 =	\$0.00
x \$39.00 =		OR	x \$78.00 =	\$0.00
+ \$130.00 =		OR	+ \$260.00 =	
TOTAL		OR	TOTAL	\$760.00

Please charge Deposit Account No. 20-1430 as follows:

- ☒ Filing fee \$ \$760.00
☒ Any additional fees associated with this paper or during the pendency of this application.
☐ The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b)
- ☐ A check for \$ _____ is enclosed.
 2 extra copies of this sheet are enclosed.

Telephone:
(415) 576-0200

Facsimile:
(415) 576-0300

Respectfully submitted,
TOWNSEND and TOWNSEND and CREW LLP

J. Georg Seka
J. Georg Seka
Reg No.: 24,491
Attorneys for Applicant